PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

MS33325

CLAIMS AS FILED - PART I									SMALL	ENTITY		OTHER	THAN
		-	(Column 1)			(Column 2)			TYPE		OR	SMALL	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		1	RATE	FEE]	RATE	FEE
BASIC FEE						· · · · · · · · · · · · · · · · · · ·		[345.00	OR		690.00
TOTAL CLAIMS			10) minus 20=			*		[X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3			= *			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	090		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL I		
ENT A		CLAIMS REMAINING AFTER AMENDMEN			l PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total			Minus	**		=	[X\$ 9=		OR	X\$18=	
4ME	Independent	*		Minus	***		=		X39=		OR	X78=	
Ì	FIRST PRESE	:NTATIC	ON OF MI	ULTIPLE DE	:PENC	JENT CLAIM		ľ	+130=		OR	+260=	
l								L	TOTAL		{ !	TOTAL	
l	•										OP	101AL	
	•	(C-1	umn 4)		,_	Johnson O,	(Column C)		ADDIT. FEE		JOR ,	ADDIT. FEE	
		CL	umn 1) AIMS	T		Column 2)	(Column 3)				j or , j i	ADDIT. FEE	
ENT B	Fund	CL REM AF			PF		(Column 3) PRESENT EXTRA				JOR ,	ADDIT. FEE	ADDI- TIONAL FEE
NDMENT B	Total	CL REM AF	AIMS IAINING FTER	Minus	PF	HIGHEST NUMBER REVIOUSLY	PRESENT		ADDIT. FEE	ADDI- TIONAL	OR OR	ADDIT. FEE	ADDI- TIONAL
AMENDMENT B	Independent	CL REM AF AMEN	AIMS IAINING FTER NGMENT	Minus	PF ***	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT B		CL REM AF AMEN	AIMS IAINING FTER NGMENT	Minus	PF ***	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9=	ADDI- TIONAL	OR	RATE X\$18=	ADDI- TIONAL
AMENDMENT B	Independent	CL REM AF AMEN	AIMS IAINING FTER NGMENT	Minus	PF ***	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9= X39=	ADDI- TIONAL	OR OR OR	RATE X\$18= X78=	ADDI- TIONAL
AMENDMENT B	Independent	CL REM AR AMEN *	AIMS IAINING FTER NOMENT ON OF MU	Minus	*** *** ***	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2)	PRESENT EXTRA		RATE X\$ 9= X39= +130= TOTAL	ADDI- TIONAL	OR OR OR	RATE . X\$18= X78= +260= TOTAL	ADDI- TIONAL
	Independent	CL REM AR AMEN * * * * * * * * * * * * * * * * * * *	AIMS IAINING FTER NOMENT ON OF MU	Minus	PF F C C C C C C C C C C C C C C C C C C	HIGHEST NUMBER REVIOUSLY PAID FOR 23 DENT CLAIM	PRESENT EXTRA		RATE X\$ 9= X39= +130= TOTAL	ADDI- TIONAL	OR OR OR	RATE . X\$18= X78= +260= TOTAL	ADDI- TIONAL
	Independent	CL REM AR AMEN * * * * * * * * * * * * * * * * * * *	LAIMS IAINING FTER NOMENT ON OF MU LAIMS IAINING FTER	Minus	PF F C C C C C C C C C C C C C C C C C C	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY	PRESENT EXTRA (Column 3) PRESENT		RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE	ADDI- TIONAL FEE ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE	ADDI- TIONAL FEE
	Independent FIRST PRESE Total Independent	CL REM AF AMEN * * * * * * * * * * * * * * * * * * *	LAIMS IAINING FTER NOMENT ON OF MU LAIMS IAINING FTER NDMENT	Minus ULTIPLE DE	*** *** *** *** ***	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA (Column 3) PRESENT EXTRA = = = =		RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE RATE X\$ 9=	ADDI- TIONAL FEE ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18=	ADDI- TIONAL FEE
	Independent FIRST PRESE	CL REM AF AMEN * * * * * * * * * * * * * * * * * * *	LAIMS IAINING FTER NOMENT ON OF MU LAIMS IAINING FTER NDMENT	Minus ULTIPLE DE	*** *** *** *** ***	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA (Column 3) PRESENT EXTRA = = = =		RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE	ADDI- TIONAL FEE ADDI- TIONAL	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78=	ADDI- TIONAL FEE
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. AMENDMENT C	Independent FIRST PRESE Total Independent	CCIREMARAMEN * * * * * * * * * * * * * * * * * *	UMN 1) AIMS IAINING FTER IAIMS IAINING FTER IAINING FTER	Minus ULTIPLE DE Minus Minus ULTIPLE DE the entry in col aid For" IN TH	PF (C) *** *** EPENE Iumn 2, IIS SP/	Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM COLUMN 2) HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM COLUMN 20 in column 20 i	PRESENT EXTRA (Column 3) PRESENT EXTRA = = = = = = = = = = = = = = = = = = =		RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE RATE X\$ 9= X39=	ADDI-TIONAL FEE	OR OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78=	ADDI- TIONAL FEE ADDI- TIONAL FEE